

## **DEPARTMENT OF HEALTH AND SENIOR SERVICES**

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## 2005 EMS Week Awards Nomination Form

My nomination is for the following award category (check one only): EMS BLS Volunteer of the Year EMS Educator of the Year EMS Dispatcher "Star of Life" Award EMS Career BLS Employee of the Year EMS Paramedic of the Year EMS "Star of Life" Award EMS First Responder of the Year Citizen "Star of Life" Award EMS Volunteer Service of the Year Youth "Star of Life" Award EMS Private Provider of the Year **EMS Public Education Award** EMS Public Provider of the Year EMS Career Lifetime Achievement EMS Medical Director of the Year EMS Volunteer Lifetime Achievement EMS Administrator of the Year **EMS Memorial** Name of Nominee: Agency Affiliation: Address: City, State, Zip: Phone Number: If the nominee is a group of individuals, please list their names on the back of this page and provide a full address, agency affiliation and a phone number. Explain why you are nominating this individual or group for the above award. You may attach up to four additional pages to support your nomination. Please mail to: New Jersey Department of Health and Senior Services, Office of Emergency Medical Services, Attn: Chuck McSweeney, PO Box 360, Trenton, New Jersey 08625 or fax to (609) 633-7839. Deadline for nominations is March 4, 2005. **Submitter Information**: